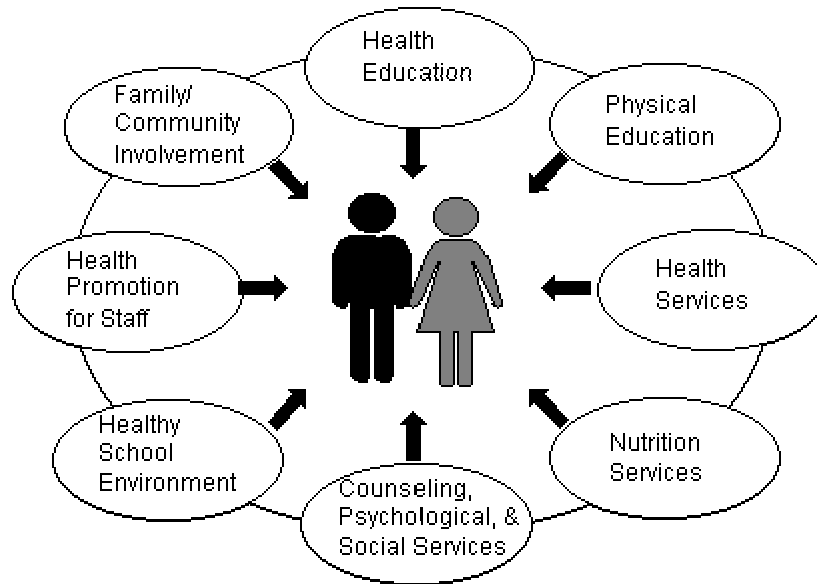


Module 2: Health Education

Instructions for Module Coordinator

Habits and practices related to physical activity, eating, and tobacco use are influenced by the entire school environment. That's why the *School Health Index* has eight different modules, which correspond to the eight components of a coordinated school health program shown below.



Instructions for completing the module

1. Work with the site coordinator to organize a team to complete the module's documents. Below are some suggested members for the Module 2 team.

Health education teacher(s)
Physical education teacher(s)
Other teacher(s)
School food service manager

School nurse
Parent(s)
Student(s)
School counselor
Health department representative

2. Make a photocopy of the module Questionnaire (pages 4-12) for each Module 2 team member. Make at least one photocopy of the module Score Card (page 3) and the module Planning Questions (pages 13-14).
3. Give each Module 2 team member a copy of the Module 2 Questionnaire. Use the copies of the module Score Card and the Planning Questions to record the team's work. Put the originals of these documents away in case you need to make more photocopies.

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4. At a Module 2 team meeting:

- Discuss each question on the Module 2 Questionnaire and its scoring choices.
- Decide how to collect any information you need to answer each question accurately.
- After you have all the information you need, arrive at a consensus score for each question. Answer each question as accurately as possible. The School Health Index is **your** self-assessment tool for identifying strengths and weaknesses and for planning improvements; it should not be used for evaluating staff.
- Record the scores (0 to 3) for each question on the module Score Card and calculate the overall Module Score.
- Use the scores written on the module Score Card to complete the Planning Questions at the end of the module.
- Use the results from the third question in Planning Questions to identify the one, two, or three highest priority actions that you will recommend to the *School Health Index* team for implementation this year.
- Use the answers to the Planning Questions to decide how you will present your results and recommendations at the follow-up *School Health Index* team meeting.

We wish you success in your efforts to improve the health of young people!

Module 2: Health Education

Score Card (photocopy before using)

Instructions

1. Carefully read and discuss the Module 2 Questionnaire, which contains questions and scoring descriptions for each item listed on this Score Card.
2. Circle the most appropriate score for each item.
3. After all questions have been scored, calculate the overall Module Score and complete the Module 2 Planning Questions located at the end of this module (pages 13-14).

		Fully in Place	Partially in Place	Under Develop- ment	Not in place
2.1	Required health education course	3	2	1	0
2.2	Health education grading	3	2	1	0
2.3	Sequential health education curriculum consistent with standards	3	2	1	0
2.4	Essential physical activity topics	3	2	1	0
2.5	Essential healthy eating topics	3	2	1	0
2.6	Essential tobacco-use prevention topics	3	2	1	0
2.7	Active learning strategies	3	2	1	0
2.8	Opportunities to practice skills	3	2	1	0
2.9	Culturally appropriate examples and activities	3	2	1	0
2.10	Assignments encourage student interaction with family and community	3	2	1	0
2.11	Certified health education teachers	3	2	1	0
2.12	Professional development for teachers	3	2	1	0
2.13	Teachers participate in professional development to deliver school's curriculum	3	2	1	0

COLUMN TOTALS: For each column, add up the numbers that are circled and enter the sum in this row.

TOTAL POINTS: Add the four sums above and enter the total to the right.			
MODULE SCORE = (Total Points / 39) X 100			%

Module 2: Health Education

Questionnaire

2.1 Required health education course

Does the school require all students to take and pass at least one health education course?

Note: If your school has more than four grade levels (for example, grades 7-12), answer this question instead: “Does the school require all students to take and pass at least two health education courses?” and for answer response 2 below replace “one course” with “two courses.”

3 = Yes.

2 = Students are required to take one course, but they do not have to take it again if they fail it.

1 = No, but there are plans to require such a course.

0 = No.

2.2 Health education grading

Do students earn grades for required health education courses? Do the grades count as much as grades for other subjects toward academic recognition (for example, honor roll, class rank)?

3 = Yes. (Note: If the school does not give academic recognition but does give a grade, you can select 3.)

2 = Students earn grades, but the grades count less than grades for other subjects.

1 = No, but there are plans to change this procedure.

0 = No, **or** there are no required health education courses.

2.3 Sequential health education curriculum consistent with standards

Do all who teach health education use a sequential* health education curriculum that addresses physical activity, healthy eating, and a tobacco-free lifestyle and is consistent** with state or national standards for health education (see standards below)?

**Sequential means a curriculum that builds on concepts taught in preceding years.*

***Consistent means that the curriculum addresses the key learning objectives identified by the standards.*

3 = Yes.

2 = Some use a sequential health education curriculum that addresses physical activity, healthy eating, and tobacco use, and it is consistent with state or national standards.

1 = Some use a sequential health education curriculum that addresses physical activity, healthy eating, and tobacco use, but it is not consistent with state or national standards.

0 = None do, **or** the curriculum is not sequential, **or** it does not include physical activity or healthy eating or tobacco-use, **or** there is no health education curriculum.

National Health Education Standards (For Question 2.3)

1. Students will comprehend concepts related to health promotion and disease prevention.
2. Students will demonstrate the ability to access valid information and health-promoting products and services.
3. Students will demonstrate the ability to practice health-enhancing behaviors and reduce health risks.
4. Students will analyze the influence of culture, media, technology, and other factors on health.
5. Students will demonstrate the ability to use interpersonal communication skills to enhance health.
6. Students will demonstrate the ability to use goal-setting and decision-making skills to enhance health.
7. Students will demonstrate the ability to advocate for personal, family, and community health.

Joint Committee on National Health Education Standards. *National Health Education Standards: Achieving Health Literacy*. Atlanta: American Cancer Society, 1995.

2.4 Essential physical activity topics

Does the health education curriculum address all of these essential physical activity topics?

- ✓ benefits of physical activity, including physiological, psychological, and social benefits
- ✓ illnesses related to a sedentary lifestyle
- ✓ components of health-related fitness, including cardiovascular endurance, muscular endurance, muscular strength, flexibility, and body composition
- ✓ phases of a workout, including warm-up, workout, and cool-down
- ✓ opportunities for physical activity at school and in the community
- ✓ preventing injury during physical activity
- ✓ basic first aid, including preventing the spread of blood-borne pathogens
- ✓ weather-related safety measures, such as avoiding heat stroke and hypothermia
- ✓ influence of culture and media on physical activity
- ✓ finding valid information and services related to physical activity and fitness
- ✓ interpersonal communication skills for physical activity
- ✓ goal-setting and decision-making skills for physical activity
- ✓ how students can influence and support others to engage in physical activity
- ✓ planning a personal physical activity program
- ✓ risks of using performance-enhancing drugs
- ✓ effects of tobacco use on fitness and physical performance (for example, impaired lung function and reduced stamina)

3 = Yes.

2 = Most of the topics.

1 = Only a few of the topics.

0 = One or none of the topics, **or** there is no health education curriculum.

2.5 Essential healthy eating topics

Does the health education curriculum address all of these essential healthy eating topics?

- ✓ benefits of healthy eating
- ✓ illnesses related to unhealthy eating
- ✓ the Dietary Guidelines for Americans
- ✓ the Food Guide Pyramid
- ✓ using food labels
- ✓ identifying foods that are high in vitamins and minerals
- ✓ identifying foods that are low in fat, saturated fat, cholesterol, sodium, and added sugars
- ✓ eating plenty of fruits, vegetables, and grains
- ✓ eating plenty of calcium-rich foods
- ✓ food safety, including hand washing, food purchasing, preparation, and storage
- ✓ preparing meals and snacks that are low in fat, sodium, and added sugars
- ✓ balancing food intake and physical activity
- ✓ accepting body size differences
- ✓ influence of culture and media on dietary behavior
- ✓ finding valid information and services related to healthy eating
- ✓ interpersonal communication skills for healthy eating
- ✓ goal-setting and decision-making skills for healthy eating
- ✓ how students can influence and support others to engage in healthy eating
- ✓ healthy weight control and risks of unhealthy weight control practices, such as crash diets, purging, and tobacco use
- ✓ eating disorders

3 = Yes.

2 = Most of the topics.

1 = Only a few of the topics.

0 = One or none of the topics, **or** there is no health education curriculum.

2.6 Essential tobacco-use prevention topics

Does the health education curriculum address all of these essential tobacco-use prevention topics?

- ✓ Short- and long-term health consequences of tobacco use
- ✓ legal, social, and financial consequences of tobacco use
- ✓ addictive nature of nicotine
- ✓ effects of tobacco use on athletic performance
- ✓ health effects of second-hand smoke and benefits of a smoke-free environment
- ✓ health benefits of abstaining from tobacco use
- ✓ the social influences on tobacco use, including media, family, peers, and culture
- ✓ reasons why students do and do not use tobacco
- ✓ student overestimates of how many of their peers use tobacco
- ✓ interpersonal communication skills to avoid tobacco use (for example, refusal and assertiveness)
- ✓ goal-setting and decision-making skills related to not using tobacco
- ✓ finding valid information and services related to tobacco-use prevention and cessation
- ✓ how students can support others who abstain from or want to quit using tobacco
- ✓ school and community action to support a tobacco-free environment
- ✓ harmful effects of tobacco use on fetal development

3 = Yes.

2 = Most of the topics.

1 = Only a few of the topics.

0 = One or none of the topics, **or** there is no health education curriculum.

2.7 Active learning strategies

Do most or all physical activity, healthy eating, and tobacco-use prevention lessons feature active learning* strategies and activities that students find enjoyable and personally relevant?

**Active learning means activities that involve student participation rather than lecture format.*

3 = Yes.

2 = About half of the lessons do.

1 = Less than half do.

0 = None do.

2.8 Opportunities to practice skills

Do most or all physical activity, healthy eating, and tobacco-use prevention lessons teach the skills needed to adopt healthy lifestyles*, and do the lessons give students opportunities to practice these skills rather than only to learn facts?

**Examples of skills needed to adopt healthy lifestyles include:*

- ✓ *reading food labels*
- ✓ *identifying foods on restaurant menus that are low in saturated fat, cholesterol, and sodium*
- ✓ *planning meals*
- ✓ *monitoring one's own physical activity and eating behaviors*
- ✓ *preventing injury during physical activity*
- ✓ *developing a safe, individualized physical activity plan*
- ✓ *identifying and countering tobacco industry marketing strategies*
- ✓ *coping with difficult personal situations such as peer pressure and family tobacco use*
- ✓ *avoiding second-hand smoke and asserting one's right to a tobacco-free environment*

3 = Yes.

2 = About half of the lessons do.

1 = Less than half do.

0 = None do.

2.9 Culturally appropriate examples and activities

Do all who teach health education use a variety of culturally appropriate examples and activities* that are inclusive of the community's ethnic cultures?

**Examples of culturally appropriate activities include:*

- ✓ *featuring people of various ethnic/racial backgrounds*
- ✓ *highlighting the contributions and skills of people from a variety of cultural, racial, and ethnic groups*
- ✓ *not stigmatizing or stereotyping any groups*
- ✓ *validating and building students' self-esteem and sense of culture and national background*
- ✓ *reflecting an acknowledgement of and excitement about student diversity*

3 = Yes.

2 = At least half of the teachers do.

1 = Less than half do.

0 = None do.

2.10 Assignments encourage student interaction with family and community

Do all who teach health education use assignments and projects that encourage students to interact with family members* and community organizations**?

Examples of ways to **interact with family members include:*

- ✓ *doing homework assignments with parents, guardians, or other family members*
- ✓ *conducting surveys of family members*
- ✓ *sharing information with family members*
- ✓ *exhibiting student projects at school for family viewing*
- ✓ *participating in fun family activities related to physical activity and healthy eating*
- ✓ *encouraging family discussion of the negative aspects of tobacco use*

***Examples of ways to **interact with community organizations** include:*

- ✓ *gathering information about existing community-based services*
- ✓ *having students volunteer to help deliver services through community-based organizations*
- ✓ *participating in community-based special events, attending community-based organizations after school, and participate in tobacco presentation activities*
- ✓ *participating in community actions such as supporting tobacco-free environments (for example, smoke-free restaurants and theaters) and making it harder for young people to buy tobacco products*

3 = Yes.

2 = At least half of the teachers do.

1 = Less than half do.

0 = None do.

2.11 Credentialed health education teachers

Are all health education courses taught by credentialed * health education teachers?

**Credentialed means teachers who have been awarded a credential by the state permitting them to teach health education.*

3 = Yes.

2 = Most courses are taught by a credentialed health education teacher.

1 = Few courses are taught by a credentialed health education teacher.

0 = No courses are taught by a credentialed health education teacher.

2.12 Professional development for teachers

Do all who teach health education participate in professional development/continuing education* in health education at least once a year?

**Professional development/continuing education means on-site (for example, school, district) and off-site (for example, city, state, national) training opportunities.*

3 = Yes.

2 = At least half of the teachers do.

1 = Less than half do.

0 = None do.

2.13 Teachers participate in professional development to deliver school's curriculum

Do most or all who teach students about physical activity, healthy eating, and a tobacco-free lifestyle participate in professional development that includes these features specific to the school's health education curriculum?

- ✓ discussion of the curriculum's underlying theory and conceptual framework
- ✓ demonstration of program activities by a skilled trainer
- ✓ opportunities to practice curricular activities

3 = Yes.

2 = At least half of the teachers do.

1 = Less than half do.

0 = None do.

Module 2: Health Education

Planning Questions ***(photocopy before using)***

The Module 2 Planning Questions will help your school use its *School Health Index* results to identify and prioritize changes that will improve policies and programs for promoting physical activity, healthy eating, and a tobacco-free lifestyle. The answers on this form should guide your module team's presentation to the entire *School Health Index* team.

Planning Question 1

Look back at the scores you assigned to each question. According to these scores, what are the strengths and the weaknesses of your school's health education program related to promoting physical activity, healthy eating, and a tobacco-free lifestyle?

Planning Question 2

For each of the weaknesses identified above, list several recommended actions to improve the school's scores (for example, require all students to take and pass at least one health education course).

Continued on next page

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Planning Question 3: List each of the actions identified in question 2 above. Use the five-point scales defined below to rank each action on five dimensions (importance, cost, time, commitment, feasibility). Add the ranking points for each action to get total points. Use the total points to help you choose one, two, or three top-priority actions that you will recommend to the *School Health Index* team for implementation this year.

Importance	How important is the recommendation to my school? 5 = Very important 3 = Moderately important 1 = Not important
Cost	How expensive would it be to plan and implement the recommendation? 5 = Not expensive 3 = Moderately expensive 1 = Very expensive
Time	How much time and effort would it take to implement the recommendation? 5 = Little or no time and effort 3 = Moderate time and effort 1 = Very great time and effort
Commitment	How enthusiastic would the school community be about implementing the recommendation? 5 = Very enthusiastic 3 = Moderately enthusiastic 1 = Not enthusiastic
Feasibility	How difficult would it be to attain the recommendation? 5 = Not difficult 3 = Moderately difficult 1 = Very difficult

[illegible]